Brian Kent case 2:22-cv-00551-PD Document 2 Filed 02/11/22 Page 1 of 36 G40 2/2/22 JEFF GRACE to Judge Diamond SIR Im organizing these the best I can but Im not a attorney so please beer whit me one of these is for Judge Methyl For eligal sentenceing he sould not have had my trail or agreement on videio and in Front of other inmates were thay knew my charges or atcome of the case and like I said the prison refuses two doany hegal work tor me so they keep moving me ground so they don't have to and my do prosses is being voialated that well not let me contact my hawer or family by not Letters me call or get my numbers out of phone or wallet were keeme in B got notelaphone calls there was no case worker there greivences in here and paperous K that proves what they refuse I whad money stolen from me and they well mot help me get it hadk a immates gettreind I Let put money on my books from my eard put money on his hooks whitout my permission all I want is what is mine noone clase its foom my tax money my main things are the Doc and the church all the rest may not be right in Fileing if there is any Foarms I may need to file please sand to me Like I said it was pulling though to get these than k you Modern

# UNITED STATES DISTRICT COURT

for the

Eastern District of Pennsylvania

	Case No.
JEFFGRACE	(to be filled in by the Clerk's Office)
Plaintiff(s)  (Write the full name of each plaintiff who is filing this complaint.  If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)  -V-	Address
Bucks county Prison	B. The Defendant(s)
Defendant(s)  (Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names. Do not include addresses here.)	Provide the information below for each definitional, a government agrees, an organities of helow are memoral to those continues the porsents job or information and check individual caractry or ufficial espacity or to

### COMPLAINT FOR VIOLATION OF CIVIL RIGHTS

(Prisoner Complaint)

#### NOTICE

Federal Rules of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should not contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include only: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Except as noted in this form, plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

The Clerk will not file a civil complaint unless the person seeking relief pays the entire filing fee (currently \$350) and an administrative fee (currently \$52) in advance, or the person applies for and is granted in forma pauperis status pursuant to 28 U.S.C. § 1915. A prisoner who seeks to proceed in forma pauperis must submit to the Clerk (1) a completed affidavit of poverty and (2) a copy of the trust fund account statement for the prisoner for the six month period immediately preceding the filing of the complaint, obtained from and certified as correct by the appropriate official of each prison at which the prisoner is or was confined for the preceding six months. See 28 U.S.C. § 1915(a)(2).

If the Judge enters an order granting a prisoner's application to proceed in forma pauperis, then the order will assess the filing fee (currently \$350) against the prisoner and collect the fee by directing the agency having custody of the prisoner to deduct an initial partial filing fee equal to 20% of the greater of the average monthly deposits to the prison account or the average monthly balance in the prison account for the six-month period immediately preceding the filing of the complaint, as well as monthly installment payments equal to 20% of the preceding month's income credited to the account for each month that the balance of the account exceeds \$10.00, until the entire filing fee has been paid. See 28 U.S.C. § 1915(b). A prisoner who is granted leave to proceed in forma pauperis is obligated to pay the entire filing fee regardless of the outcome of the proceeding, and is not entitled to the return of any payments made toward the fee.

### I. The Parties to This Complaint

### A. The Plaintiff(s)

Provide the information below	for each plaintiff named in the complaint.	Attach additional pages if
needed.	Lastern District of County in	

Name

All other names by which
you have been known:

ID Number

Current Institution

Address

Doylectorn

City

State

Teff GRACE

All other names by which
you have been known:

ID Number

Current Institution

Bucks count y

1730 S Easton rd

Doylectorn

City

State

Zip Code

### B. The Defendant(s)

Defendant No. 1

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. Make sure that the defendant(s) listed below are identical to those contained in the above caption. For an individual defendant, include the person's job or title (if known) and check whether you are bringing this complaint against them in their individual capacity or official capacity, or both. Attach additional pages if needed.

Name	Bucks country DOC
Job or Title (if known)	will state and and
Shield Number	untardena a ranosa sa)
Employer	Bocks county
Address	1730 S Easton Rd
	Doylestown PA 18901 City State Zip Code
	Individual capacity Official capacity
Defendants 2	
Defendant No. 2	Prime care inc
Name	Trime care inc
Job or Title (if known)	<ul> <li>Tomas prosperso must submit to the Cherk (1) a considered at reducit of poverty and (2) a copy;</li> </ul>
Shield Number	which the prisoner is or was confined for the preceding we make. See 28 U.S.C. § 1915(a)
Employer	Bucks county Prison
Address	egalast the personer and collect the 'ce by directing the age my having custody of the prisoner
	proceding the filling of the compliant, as well as assuming installment payabate equal to 70%.
	City State Zip Code
	Individual capacity Official capacity

officials?

Defendant No. 3 Name	county mental Health Serveces
Job or Title (if known)	
Shield Number	
Employer Address	Bucks county prison
	Doylestown PA 18901 City State Zip Code
of personal and services of the	Individual capacity Official capacity
Defendant No. 4	
Name	2 24 20 20 20 20 20 20 20 20 20 20 20 20 20
Job or Title (if known)	TI. Priconny Matrix
Shield Number	
Employer	indicate whether you are a pulsation or emencontinued person
Address	Pretrial detainse
	manifesta hallurary on williarity
	City State Zip Code
	Individual capacity Official capacity
Basis for Jurisdiction	
immunities secured by the Constitution and [f	or local officials for the "deprivation of any rights, privileges, or [federal laws]." Under <i>Bivens v. Six Unknown Named Agents of</i> (1971), you may sue federal officials for the violation of certain
A. Are you bringing suit against (check al.	all that apply):
Federal officials (a Bivens claim)	State as briefly as possible the facts of your case. Leading la alleged wrongful action, stong with the dates and focultons (n further details such as the names of other persons involved in
State or local officials (a § 1983	
the Constitution and [federal laws]."	the "deprivation of any rights, privileges, or immunities secured by 42 U.S.C. § 1983. If you are suing under section 1983, what that (s) do you claim is/are being violated by state or local officials?
or are my medical	Heath needs and my
Due prossess has h	been Violated as well ass civil Right
	aly recover for the violation of certain constitutional rights. If you

are suing under Bivens, what constitutional right(s) do you claim is/are being violated by federal

Page 3 of 11

		decidant No. 3	
		not attlact to mental Health Ser	
		John of Little virkament	
	D.	Section 1983 allows defendants to be found liable only when they have acted "under c statute, ordinance, regulation, custom, or usage, of any State or Territory or the District 42 U.S.C. § 1983. If you are suing under section 1983, explain how each defendant acted of state or local law. If you are suing under <i>Bivens</i> , explain how each defendant acted federal law. Attach additional pages if needed.	t of Columbia." eted under color under color of
210	n the	of get my mental Heath drugs ressured and theme the Heath dept failed to send metoll endoctors to Hospital wanted another check a Bucks county Preson for one has not bet menty and Has Let immetes still med money	hispheeep ospild for up and egall abo
III.	Prison	isoner Status	
	T 1'		
	Indica	licate whether you are a prisoner or other confined person as follows (check all that apply):	
		Pretrial detainee 285 100 A	
	0 Corgo	Civilly committed detainee	
		Immigration detainee	
		Convicted and sentenced state prisoner	
	io carant	Convicted and sentenced federal prisoner	
	o Engl	Other (explain)	simmunio Busine
IV.	Staten	tement of Claim	
	alleged further any cas	e as briefly as possible the facts of your case. Describe how each defendant was personally ged wrongful action, along with the dates and locations of all relevant events. You may wisher details such as the names of other persons involved in the events giving rise to your claim cases or statutes. If more than one claim is asserted, number each claim and write a short a sement of each claim in a separate paragraph. Attach additional pages if needed.	th to include ms. Do not cite nd plain
	A.	If the events giving rise to your claim arose outside an institution, describe where and	when they arose.
		4 got paper work and statements	-0
	B.	If the events giving rise to your claim arose in an institution, describe where and when	they arose.
		aments suing and the west any only recover for the violence of certain communical regards suing under fibrers, what constitutional right(s) do you claim solare being violated by factoricals?	
		in poper work sent	
			na Bo

C. What date and approximate time did the events giving rise to your claim(s) occur?

in paperwork

D. What are the facts underlying your claim(s)? (For example: What happened to you? Who did what? Was anyone else involved? Who else saw what happened?)

in paper work

### V. Injuries

If you sustained injuries related to the events alleged above, describe your injuries and state what medical treatment, if any, you required and did or did not receive.

in paper world

#### VI. Relief

State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes. If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims.

all I want is what eary other inmate wants my med s sent to doctor my papers out at wallet and numbers on cord and phone calls and I want to go to mens center and work in Kitchen and he payed and my money back that is it and if in ill from water at Payette a Judgement

## VII. Exhaustion of Administrative Remedies Administrative Procedures

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted."

Administrative remedies are also known as grievance procedures. Your case may be dismissed if you have not exhausted your administrative remedies.

A.	Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?			
	Yes			
	□ No			
	If yes, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).			
	If you suspined injuries related to the events alleged above, describe your injuries and state what exertement. If now, you required and tild not no rive.			
B.	Does the jail, prison, or other correctional facility where your claim(s) arose have a grievance procedure?			
	Yes			
	□ No			
	Do not know			
C.	Does the grievance procedure at the jail, prison, or other correctional facility where your claim(s) arose cover some or all of your claims?			
	State briefly what you want the court to do for you, Make no legal arguments. Do not easy unless if requesting money damages, include the amounts of any actual damages dud or points very unit the acts alleged. Explain the basis for these claims.			
	No No			
	Do not know  If yes, which claim(s)?			
	If yes, which claim(s)?			
	sock that is signed if in ill from water at Reports			
	in paper work			

D.	Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose concerning the facts relating to this complaint?			
	Yes			
	□ No			
	If no, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?			
informe	Yes Yes			
	□ No			
E.	If you did file a grievance:			
	1. Where did you file the grievance?			
	<ul> <li>G. Please set forth any adollors information that is relevant to the exhaustion of your administration.</li> </ul>			
	Bucks county			
	James grant			
	2. What did you claim in your grievance?			
	ally man peper well was a majorial made concern a send "alor earlier and "alor earli			
	3. What was the result, if any?			
	danger of scrious physical impay." 25 U.S.C. § 1915(g).  To the best of your knowledge, have you had a case dismissed based on this "three strikes rule"?			
	in paper welle			
	4. What steps, if any, did you take to appeal that decision? Is the grievance process completed? If not, explain why not. (Describe all efforts to appeal to the highest level of the grievance process.)			
	If yes, suite which court dismissed your case, when this occurred, and attach a copy of the order if yo			
	in paper work			

	F. (8	If you did not file a grievance:
		1. If there are any reasons why you did not file a grievance, state them here:
		If no, did you file a crecame about the events described in this complaint at OM ar sail
		2. If you did not file a grievance but you did inform officials of your claim, state who you informed, when and how, and their response, if any:
		on El
		L. Where did you tile the prievance?
	G.	Please set forth any additional information that is relevant to the exhaustion of your administrative remedies.
		in paper and le
		(Note: You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies.)
VIII.	Previo	us Lawsuits
	the filir brought malicio	aree strikes rule" bars a prisoner from bringing a civil action or an appeal in federal court without paying a fee if that prisoner has "on three or more prior occasions, while incarcerated or detained in any facility, an action or appeal in a court of the United States that was dismissed on the grounds that it is frivolous, out, or fails to state a claim upon which relief may be granted, unless the prisoner is under imminent of serious physical injury." 28 U.S.C. § 1915(g).
	To the	best of your knowledge, have you had a case dismissed based on this "three strikes rule"?
	Ye	es / AI
	No	4. What steps, if any, did you take to appear that decision? Is the grievance process conduct, explain why not. (Describe all efforts to appeal to the highest level of the griever
	If yes,	state which court dismissed your case, when this occurred, and attach a copy of the order if possible.

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E.D.Pa. AO Pro Se 14	(Rev 01/21)	Complaint for	Violation	of Civil Rights)
L.D.1 a. AO 110 SC 17	1100.01/21	Complaint for	v Ioranor	of Civil Mights)

	ve you filed other lawsuits in state or federal court dealing with the same facts involved in this ion?
	Yes
L	No guiza same valuema mazima nal lapanistia siti ad adada bi varendene mati seom
	your answer to A is yes, describe each lawsuit by answering questions 1 through 7 below. (If there are than one lawsuit, describe the additional lawsuits on another page, using the same format.)
1.	Parties to the previous lawsuit
	Plaintiff(s)  Defendant(s)
2.	Court (if federal court, name the district; if state court, name the county and State)
3.	Docket or index number
4.	Name of Judge assigned to your case
5.	Approximate date of filing lawsuit
6.	Is the case still pending?
	Yes
	If no, give the approximate date of disposition
	If no, give the approximate date of disposition.
7.	What was the result of the case? (For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)

## Case 2:22-cv-00551-PD Document 2 Filed 02/11/22 Page 11 of 36

E.D.Pa, AO Pro S	e 14 ( Re	ev. 01/21) Complaint for Violation of Civil Rights	
affic e e e e e e e e e e e e e e e e e e e	Sapara properties	Yes	
		l No	
D.	If y mo	your answer to C is yes, describe each lawsuit by answering questions 1 througone than one lawsuit, describe the additional lawsuits on another page, using the	gh 7 below. (If there is he same format.)
	1.	Parties to the previous lawsuit	
		Plaintiff(s)	
		Defendant(s)	
	2.	Court (if federal court, name the district; if state court, name the county and	! State)
	3.	Docket or index number	
		THE FIRST STATE OF THE STATE OF	
	4.	Name of Judge assigned to your case	
			88030 <u></u>
	5.	Approximate date of filing lawsuit	
			<u> 2004 (1)                                   </u>
	6.	Is the case still pending?	
		Yes	
		No	
		If no, give the approximate date of disposition	
	-	What was the sault of the case 77	Wag indoment automad
	7.	What was the result of the case? (For example: Was the case dismissed? V in your favor? Was the case appealed?)	rus juugmeni enierea
		than an earlie than the commence of the state of the stat	

### IX. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

### A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case—related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing: $1 - l$	9-2027	
Signature of Plaintiff	JEFFGRACE SMORE	
Printed Name of Plaintiff	JESTCRACE	
Prison Identification #		
Prison Address	1730 5 Easton rd	
I madison Ave u	Doylestown 1 PA 18901 City State Zip Code var minister PA 18974	
B. For Attorneys	10016	
Date of signing:		
Signature of Attorney		
Printed Name of Attorney		
Bar Number		
Name of Law Firm		
Address		
	City State Zip Code	
Telephone Number	267-631-2919	
E-mail Address	GRACE JEFF126@Snail.com	

Case 2:22-cv-00551-PD Document 2 Filed 02/11/22 Page 13 of \$\( \begin{align\*}
 \begin{align\*}
 & \delta &

Jeff 123 GRACE 083635 083635

SIT I would like a point out of all of this years trans actions from who put money on my account to what was baught my cretit card was used and someone put money from my card on his books that I didn't attaise and I'm didputeing those transactions I was Her 2 or three times these year need to know girls name a livour in mate James Devin we were on Gor & Block

Mc JH-12-29-2)

to whom it may concern this is how stopid this system is instead of gettinger a Temperand Health needs they do nother but spineury one around in Here I want to Know what your going to do before Cwate which I v done and sent home to the news people about the Po Judgels and childrenand youth how the county Just Looks people up for nother and roin our lives for 6 mounts to a your you wonder why we don't deport the police are the municipal Judges are no better in not god woll never let thongs Lie and Die Tknow nuther is going to Happen at your Lovel because you wolk for the system and your county employers who and collect check and get fat and yes in mad

Case 2:22-cv-00551-PD Document 2 Filed 02/11/22 Page 16 of 36 and so are our family there system is set of to Fale us it doesn't telp anyone at es for the Doug-addicts and May come back two all the time im 50 tired of lighting this system it not Panny so in really done writer you people I enough what all shose county your ell bigger crokes than us and you Know it and I Know there a feet & Know gods in the court Have Het are on one side and well help and have been do you Khink we don't have downcatation of the eligal the the country of Bucks does it Just not time to expos Ent yet but its comeing these year watch the people well stop putting us in Jal Tup been sick y times in Last they mount Just

INMATE GRIEVANCE FORM NAME GRACE JEFF FACILITY BL BCCF# GRIEVANCE # 2022-02, DATE POSTED: 110.22 It is understood that all information pertaining to this grievance shall be released to the Bucks County Prison Oversight Board. ATTACH ADDITIONAL PAGES AS NEEDED Statement detailing the act or condition giving rise to this grievance: (Be specific, list all dates, times, locations and witnesses. Handwritten grievance must be legible, if not it will be returned.) dontwant todo this things but you people dont Liven all & need Statement detailing informal process which you have attempted in order to resolve this grievance: (Attach any written documentation from staff.) want to go to mens center were I can work in Kitchen over my Law work in price and quit ent or get For politiat mens early and I want to be about to call my Specific remedy being sought: howers and family at Least sought Date: Received by: First Level Response: After review, your housing is appropriate at this time. Date: Answered by:\_ Appeal to Director of Corrections: If the inmate/resident is not satisfied with the outcome of the first level response, he/she may then forward a written appeal, with the previous response, to the Director. The appeal must be filed within ten (10) days of the inmate's receipt of the first level response. After a review, the Director will make resolution in writing

Appeal to the Bucks County Prison Oversight Board. If the inmate/resident is not satisfied with the outcome of the appeal to the Director, he/she may forward a written appeal with the previous responses, within ten (10) days of receipt of the Director's response, to the Bucks County Prison Oversight Board, attn: Controller's Office, 55. E. Court Street, Doylestown, PA, 18901. The County Prison Oversight Board shall provide the Director of Corrections with a copy of any such appeal and will forward its written decision to the inmate/resident and the Director of Corrections.

within ten (10) days of receiving the appeal. (appeal form on back).

Case 2:22-cv-00551-PD Document 2 Filed 02/11/22 Page 18 of 36
BUCKS COUNTY DEPARTMENT OF CORRECTIONS INMATE GRIEVANCE FORM DATE 12-19-21
0000
NAME GRACE DOLF BCCF# 082655 FACILITY BCCP CELL B. 20
GRIEVANCE # 2021 - 93, DATE POSTED: 12.24.21, INITIALTED:
It is understood that all information pertaining to this grievance shall be released to the Bucks County
Prison Oversight Board.  ATTACH ADDITIONAL PAGES AS NEEDED
Statement detailing the act or condition giving rise to this grievance: (Be specific, list all dates, times, locations and witnesses. Handwritten grievance must be legible, if not it will be returned.)  this is about medical mental Heatth services I asked to get my meds which you people put me on and told thave to be seen be partor that she is on Vacation why can't the Douts-That is here see me is he not quillafred to see me or what Iv order a indigion that can't get that I v ask to be seen by heatth doctor and that I wask to be seen by heatth doctor and the see this so here you have all my seconds on file allocaty and I have I sumper to the proper people and got no where and I vasked to be moved because of three.
Statement detailing informal process which you have attempted in order to resolve this grievance: (Attach any written documentation from staff.) he submite 12-24-21  Transautad all rellow and have been seen by there as been spone Sust cooke you are spining me all I wet is my meds that if
Specific remedy being sought:  Lock there is no whay to satesfire you people to PII go a deferent way all you do is spen out
Received by: Date:
First Level Response:
esolution by Prison Oversight Hoard:
You failed to exhaust the informal resolution process. Therefore, your grievance is denied.

Answered by: Carl Metellin Date: 12-23.200/ Appeal to Director of Corrections: If the inmate/resident is not satisfied with the outcome of the first level response,

he/she may then forward a written appeal, with the previous response, to the Director. The appeal must be filed within ten (10) days of the inmate's receipt of the first level response. After a review, the Director will make resolution in writing

within ten (10) days of receiving the appeal. (appeal form on back).

Appeal to the Bucks County Prison Oversight Board. If the inmate/resident is not satisfied with the outcome of the appeal to the Director, he/she may forward a written appeal with the previous responses, within ten (10) days of receipt of the Director's response, to the Bucks County Prison Oversight Board, attn: Controller's Office, 55. E. Court Street, Doylestown, PA, 18901. The County Prison Oversight Board shall provide the Director of Corrections with a copy of any such appeal and will forward its written decision to the inmate/resident and the Director of Corrections.

Judge Diamond Imaskens not only fora motion to be released from prison do to Heathh resons Illunderline here I was in conserved in Fayette prison some time ago and I beleave To contracted cancer their From the warter thay stout the prison down for these Reson now the prison Here bucks will not send me to the hospitalin Doy -lestown were than put me in ARI and seen the bumps on my Lungs and asked me to come heek for seeound mai whiten 6 mounts the prison doesn't want to to spend the money and & Pell its the Doc's problem sence I may have gotten there in there care this preson Does so much elegal stuff its not funny there is blake sute blowers out of vents the Dead mice in vents the water taste fromy thay asselted me once on a Block all I did was turn ground they trowe me to the ground Kicked me in my ribs craked 3 of theme and It got mental Heath problems From being and I have a malested not only from priest but 2 others and I have other Law suite the cop who accested me has planted evadence and I can prove it I caught there in Lies he turned the water off in the Holden cell the night I was acrested & think that is a civil rights case and I was acrested & think that is a civil rights case and I have seen to sent and its vice versa so he Just doesn't Like me in sental and intrying the best I im sending all this this week and in trying the best I cane to do Doc and my malistation case also would like all my none pros cases to be expunsed from my record my one conviction the girl Lied to the police and she has ad mitted that to me and even said sk is willing to make it right but she has teaminal cancer right now and I don't want to put her trew any more than she is now

add 1 madison Ave Warminister PA 18974 prison is 1730 seaston nd Doylestown PA 18901

case #

2-1-22

Pob 06-10-1972 55 | 12320

Bucks county

here 9+ the Prison months because it is for a formation of the prison and here 9 the Prison motor asking for a formation and the prison in the it to you put By been fighting these things in my Head 4 over 40 years and been trying to get a settlement for the past 3 yeary & come to find out & kent Keep 4 Tob or a relationship because my night mares scree my spoores to Hell and I don't relate to people and it makes ne do bad Desestions that I don't mean I sust do stupid Lettel things and Bucks county is not the county todo this stuffin in trying to move away from here but I also don't want to Look over my shoulder if I get anything out of this & went to Just move away where nome of these will get to me now they suit put someone in my cell who Raiready went to the Holefor RHU he is crazy that is how crazy these place is they know im Filengalaw Suite against theme and they trow all these problems at me so I freek out that is how they run the tail the Law Liber will not do any Lawwork and on top of these the system!
took my neice away from my sister who is her wound and im asking for a mental Heatth evaluation as well but from a outside sorce not the prisons and a immediate release due to mental Heatty and my psyrical treatth as well in not insane in Fit to go to trail & Justhave issue because impropuble not on the right meds and they talk to us over a moniter not Face to Face that hed my trul all and I wanted a retrail or a appeal and my trul and I wanted a retrail or a appeal and my court appointed Lawer wouldent do it I don't need in carseration I need a secure place to talk to people about no problems

Judge Diamond Sic + Document 2 Filed 02/11/22 Page 21 of 36 all this this my first case is the church in PHily I thought Brian Kent was handeling it but im Filling on my on beltalf Prose I was malested by a preist in PHily back in the 80s a St Thons in manyunk on Recture st here is my current address I madason are warraniste-PA 18974 apt H2 # 267-631-2919 my sister Im in Bucks county on a violation my DOB is 6-10-72 06-10-1972 SS#1\_9/23/20 hereis the prison's address 1730 5 Easton rd Doylestown PA 18901 083655 G-Y and in Proceeding in Forma Pauperis I want you to know the the prison is not helping me file at all the will not let me call in their offices or mail these things in working and its not much I think & need a nother Dockt for this case not only not have ptspin by poler manic Depresion OCD HDAD and some Un diagnoised mental Desorders that they cen't exsplane yet because I don't get enough ensurrence to cover more than a mounth at a time I need to goto Lenape valley or a nother mental Health place So I can finish my Diagnoses whit the doctors

22-CV-0279

2-2-22

5754005

that is udasep2:22-cv-005517pt Documents Filed-02/11/225 Page 22 01362~ 5et my 550 my other Law suites done Ell tell you these besides me being melested by 3 deffrent people my best freinds were murdered at west coast video in warminister yearsago a it is Still unsored my brother committed suicide my Sister thinks I had something to do whit it so we don't talk me and my mon don't talk my father died in my arms at the VA in PAIRy and my First wife and son were Killed in a accident years ago I Lost 3 companies and 2 Homes because of all these and Edant Know How I keep it together sometimes Emsure other wounder as well see in not Locking to make 20 million Dollers here 2 Just want what is lare and Iv been tormented for 40 + years over these and need some closer it has effected me so, much in my Life that I don't know how much more I can take please see if i did anything wrong whit this tell me and Ell Fix It Shank you MGC2-34 083655, 2-2-22

ace getting a way who I what ever they went they took my niese out of a loving have bot Lett The other thild saying some crazy nonserve that has no barring on anything what so ever and the have Thay gave her to ignt feeding of bothers her properly gt all where she has like all the time the count? has not only crazy people working there Easked the clock of courts in both countrys for paperwork work ago and not reserved anything at all their incompades sir or maam I was released to a Helfway Housein Long. house and there for 3 mounts paying my bills on time working and not giving hot ut's Zu thought I was payed off my finesand costs and then the people at the House vere stelling from me and opened benk account 19 my name then I went to Hotel First Keystone then motel 6 who in also sveing and oldcolerial in Daylorsown now I was at patterstery court two week prior two me being arrested for rehected finger that I payed each for and one beer and a 100 Poller but that well not being used at all and the warrington cop planted evedence in mythizze they had south in out for me for years and throw whit I sued one cop because he strongeled me when I Lived on philadelphia Ave in warrington and was Plooded at These hote township and Noylestown warring ton has Stolen my camping gear and not betweened it and has been profiling me for years as well at warmenton Thankyou for your time offfer

	083655
ALL INMATES FILL IN THIS SECTION	
Name (Last, First)	Date
GAACE JOST	1-15-27
Module and Cell Number	Admission Date
MHO	12/3/21
I would like to see _m ( fansieur)	
I need to see that staff person because SIRI want two	grevences now
hecause in not sick the test	is wrong and
the outher is for mental He	eth theme not
getting me my meds and n	reed State police
Eddrest in Dublin 7 m Filling	y moore motions
next week	
	and the same of th
	Out N/
	Signature of Inmate
Do Not Write Below This Line	V ,
Data request answered:	
Answer: You have to prove	
secked other (andi)	19
Refferal Sent To:	7.1
Return To: Module & Cell #	
Signeture of Staff Person	
POOR 104 PEV 10/04	
BCCF 194 REV. 10/04  here is the post	

083632
ALL INMATES FILL IN THIS SECTION
Name (Last, First)  GRACE SEFF  Date  12-24-21
Module and Cell Number  B 33  Admission Date  1 2 7-2 1
I-would like to see Ricci
I need to see that staff person because Im not going two bother you affer this
any monre I need to know who is or was seeding
me money last time I was Here in 2021
because there is fraudulent cases beeing made
off my taxes card from H+R-Blockits a goern
and Black card it says emould whit my
name on if and thay Just youd it
40 call the company on Trees and
1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
mens center please
All leave you alone! and the
· Signature of inmate
Do Not Write Below This Line
Date request answered:
Answer: I CANNOT SEE TRANSACTIONS FROM PREVIOUS INCARCERATIONS. YOU WILL BE SCREENED FOR MC3 NEXT WEEK.
OM RICE!
12/27/21
Refferal Sent To:
Return To: Module & Cell #
Signature of Staff Person_
BCCF 194 REV. 10/04

they sent me transactions before

083655
ALL INMATES FILL IN THIS SECTION
Name (Last, First)  GANCE SERT  Dete 12.28.21
Module and Cell Number  B 33  Admission Date 12-3-21
I-would like to see G+L
I need to see that staff person because need 911 records of transactions
made to me from all parties in who port
money on books and pates in 20:21
mostly last time Here my card was used
by other in nighter and alknow who just
don't know how they did to so need
print out pot there time but time line
im ping to call card and dispute my garges
Edidat de or my mon anyoné elac
and
Do Not Write Below This Line
Date request enewered:
Answer:
1/
110
Refferal Sent To:
Return To: Module & Cell #
Signature of Staff Person (1229-21
this is about my money missing

05355 LL INMATER FILL IN THIS SECTION Name (Last, First) E Self 12 16-21 Module and Cell Number I-would like to see So who is sving I need to see that staff person because this is what GTL told me Do Not White Below This Line Date request enewered: Answer: lease do not use our services Refferral Sent To: 6.8.0 Dollers Module & Cell # im but Return To: Signature of Staff Person BCCF 194 REV. 10/04 Keepfor Lawce

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## MISCONDUCT REPORT **DEPARTMENT OF CORRECTIONS BUCKS COUNTY**

Incident Number: 22-0101-004

Inmates BCCF Number <u>083655</u> Inmates D.O.B <u>06.10.1972</u>

<b>医</b>		· ·	DI-	oo of PAins	di ot		Doto	Time
nmate's Name			ice of Miscon	auct	•	Date	Time	
Grace	Grace, Jeffrey		Sh	Shift Command			01.01.2022	1500
S	Cell	II Name			Cell	Name	L-7 . L-1	17
nate				Witnesses				
Other Inmates Involved				les:				
le le				Wit				
5			. "					
Class 8	No.	Miscondu	ct	Cla	ss & No.		Misconde	uct
1-5		cual Misconduct						
1-31	Ina	ppropriate Contact with	Staff		***			
				Officer's Vers	sion			
n la	nuary 1	2022 at approximately	1500hrs medic	al staff deliver	ed a hand	d written n	ote from I/M Grace	. Jeffrev #083
lliaon	ed with it	Aisconduct. Nothing Fu	ther to Report					,
illacii		Fisher celly						
attacii		<u>.</u>						
attacii		<u>.</u>						
	(*)	Fisher celly					1_ A	A
	(*)	<u>.</u>	d to Do		ave	y Fron	nanctu	)Ho was
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<b>H</b>	3 15 diate Ac	what the Kill his e	d to Do		ava	1 From	nanctu	ofts was
Imme RHU p	diate Acceptaints (	what the Kill his e	d to Do	, to Set		1 Fron	Time:	
Imme RHU p	diate Acceptaints (	what Thakill his stion Taken	d to Do	, to Set	22			

Shift Supervisor

Reviewed By <u>Lt. Brown</u> Shift Commander

Date Reviewed 01/01/2022

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# PLEASE RETURN TO CASE MANAGER WHEN DONE

# READING

was not aloud to sevenget numbers with

# **Inmate Orientation**

Admission - At the time of your admission you were processed by the Reception Officer and classified by a Case Manager. During this process you were given a housing assignment and assigned a custody level. As necessary, based on your responses, referrals are made to the Drug and Alcohol, Medical and Mental Health Departments.

Institutional Regulations- You are responsible to know the rules of the facility. Failure to do so can result in a loss of privileges or disciplinary sanctions, including housing in the disciplinary unit. Handbooks can be accessed on the kiosk or tablet. A printed copy can be requested from your Case Manager.

Inmate Requests - Questions can be directed to the Module Officer, your Case Manager, or the Sergeants and Lieutenants who tour the units each shift. Inmate Request Forms are also available for requesting routine services and can be placed in the Inmate Request Form box outside of the Inmate Dining Room.

Case Plan Development - You will be seen by your Case Manager within three business days of your admission. At that time, a case plan will be developed based on your risks and needs. It can include Drug and Alcohol Treatment, Mental Health Treatment, Institutional Jobs, Education Classes, etc. Your Case Manager will meet with you monthly or if your legal status changes to review your case plan. Case Managers will also determine your eligibility for minimum or medium custody.

Medical Treatment - The Department of Corrections contracts with Prime Care Inc. to supply all medical care and treatment. While you are here, you will receive a physical examination and your medical history will be taken. Screening is a mandatory state health requirement. You cannot refuse. Medical services are available twenty-four hours a day, seven days a week. You can request an appointment by using the Prime Care sick-call form. If you are having a medical emergency, contact any available staff member for assistance. If you request to see the nurse or doctor for a non-emergency issue you will be required to pay for this service. Current payments are: \$3 for the nurse, \$5 for the doctor. You will never be refused medical treatment because you lack funds.

Mental Health Treatment - The Bucks County Department of Corrections contracts with Prime Care Inc. to provide mental health care and treatment. You can request service through your Case Manager or by a written Inmate Request Form. In the event of an emergency, or if you have thoughts of suicide, contact any staff member. A suicide hotline is also available via the inmate telephone system. Follow the prompts on the telephone system and dial \*911 to place the free call.

<u>Telephone Procedures</u> - Upon your arrival you were issued an Inmate Telephone Identification Number (TID) in Reception. When you use the phone on the housing unit for the first time you will make a personal identifying voice recording (VPIN). Listen closely to the prompts on the phone to set this up. Calls can be made collect or using money from your account. To prevent any unauthorized use of your inmate funds do not share your TID number with anyone.

Mail - There are as restrictions concerning the mumber of letters/գոր/խչուգեց այլ send or receive. All incoming personal letters are opened and inspected for restricted materials, contraband, and money prior to delivery. Contraband will be confiscated and held as evidence. You are required to note your BCCF number on all pieces of outgoing mail. Read your Inmate Handbook for additional information regarding what is and is not allowed.

<u>Visitation</u> – Upon admission, you received an explanation of visiting procedures. To put someone on your list we require their name, address, telephone number and relationship to you. You can have a total of 8 active visitors on your list. Ex- inmates must receive written permission to visit. You can make monthly changes to your list through your Module Case Manager. Visits are held during specified hours/days based on your housing unit. Please note that visits may be cancelled or altered at any time. Your family can get visiting information by going to www.buckscounty.org -Government – Corrections

<u>Inmate Jobs -</u> There are a limited number of jobs available in the institution. See your Case Manager if you are interested in employment. Maximum custody inmates are only able to work on their housing units. Inmates who receive Class 1 misconducts need a certain amount of misconduct free time to apply for jobs.

Indigent Supplies - Individuals who are without funds, who have had no funds in the past 14 days and have no prospects of receiving funds in the next 14 days are considered indigent. Indigent inmates are eligible to receive a limited amount of free postage. See your Case Manager for envelopes and writing paper. Basic hygiene products are also available to those without funds. These can be ordered through the module kiosk.

<u>Sexual Misconduct (PREA)</u> — The Bucks County Department of Corrections has a zero-tolerance policy for all forms of sexual abuse or sexual harassment. Sexual misconduct/harassment of inmates by staff members, volunteers, contractors, and inmates is strictly prohibited. If you believe you have been subjected to or witnessed sexual misconduct, sexual abuse and/or sexual harassment you should report it immediately. Reports can be taken by any staff member, volunteer, contractors, and/or through the inmate phone system using the PREA hotline. Any reported incidents will be handled confidentially and without fear of retaliation. The DOC's response to all allegations will focus on the safety of the victim, providing proper treatment and support services if necessary. Perpetrators will be disciplined for any substantiated actions. Malicious false reports will result in disciplinary actions.

<u>Grievance Process</u> - This is an administrative remedy through which an inmate may seek a formal review of a complaint relating to any aspect of their confinement. This policy does not supersede any formal appeal process, or any informal complaint resolution process currently in place within the Department. See the Inmate Handbook for specifications on using this process.

givens vs commenweth

E.D. Pa. Pro Se Notice, approved February 11, 2019, revised April 20, 2021

## NOTICE OF GUIDELINES FOR REPRESENTING YOURSELF

## (APPEARING "PRO SE") IN CIVIL CASES

If you have filed a civil action in the Eastern District of Pennsylvania and you are representing yourself, please read this document for information about some of the rules and guidelines that apply in your case.

Appearing Pro Se: If you represent yourself in Court, you are called a "pro se litigant" or a "self-represented litigant." "Pro se" is a Latin term, meaning "on one's own behalf' and a "litigant" is someone who is either suing someone or is being sued in Court. The right to appear pro se in a civil case in federal court is contained in a statute, 28 U.S.C. § 1654. There are, however, certain limitations to self-representation, including: (1) in general, a pro se litigant may only bring claims on his or her own behalf; (2) corporations must be represented by an attorney; (3) a pro se litigant may not represent a class in a class action; and (4) a power of attorney does not permit a pro se litigant who is not an attorney to represent another person in federal court.

Scope of These Guidelines: This document is intended to provide some basic guidelines to litigants who are proceeding without an attorney in civil cases. It is not intended as legal advice and is not a substitute for checking the rules that apply in your case. Please note that separate guidelines may apply in *habeas* cases, which are cases in which a litigant is challenging the constitutionality of his or her criminal conviction or sentence, and asking for release from prison or that the conviction be vacated.

Current Address: The Court will send orders or notices filed in your case to you at the address you provided to the Court. It is important to keep the Court and opposing counsel, if any, advised of your current address. Failure to do so could result in Court orders or other information not being timely delivered, which may result in your case being dismissed for failure to prosecute or otherwise affect your legal rights. The Court's local rules require you to file a notice of change of address with the Clerk of Court within fourteen (14) days of an address change. See Local Rule 5.1(b).

Pennsylvania Department of Corrections (DOC) Mail Policy: In accordance with the Pennsylvania DOC's policy number DC-ADM 803, Court mail must be sent to an inmate within DOC custody at the facility where the inmate is housed. Accordingly, inmates confined within the DOC should provide the Court with the address for the facility in which they are housed for purposes of the docket. Inmates should not provide the Court with the address for SMART COMMUNICATIONS, which is the contractor handling non-privileged inmate mail, because Court mail cannot be received at that address.

Form of Submitted Documents: All documents you submit to the Court should be in the form of a pleading (e.g, complaint, amended complaint), notice, motion, brief, or supporting memorandum of law. Please put the civil action number of your case on all documents you

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file in your case. If you are asking the Court to act, you must file a motion. Any motion should include the caption of your case and the case number, have a title including the word "motion," and state the relief you would like from the Court. You should also sign and date any documents that you file with the Court. Letters to the presiding Judge or Court staff can be emailed to PAED\_Documents@paed.uscourts.gov.

**Privacy Protection**: Federal Rule of Civil Procedure 5.2 prohibits litigants in a non-habeas proceeding from submitting documents that contain personal information. Unless the Court orders otherwise, personal identifying information in Court filings must be limited as follows:

- Social security numbers, taxpayer-identification numbers, and financial account numbers must include only the last four digits (e.g., xxx-xx-1234)
- Birth dates must include the year of birth only (e.g., xx/xx/2000)
- Names of persons under the age of 18 must be indicated by initials only (e.g., A.B.)

You are responsible for protecting the privacy of this information in your filings. If your filings contain any information that does not comply with this rule, please black out that information before sending your filing to the Court.

Proceeding In Forma Pauperis: If you cannot afford to pay the \$350 filing fee and \$52 administrative fee to file your civil case, you may file a motion to proceed without prepayment of those fees (this is called proceeding in forma pauperis). If the Judge in your case allows you to proceed in forma pauperis, you will be permitted to proceed without prepayment of the filing fee. If you are a prisoner, however, you will be obligated to pay the filing fee in installments (see the notice to prisoner litigants). Please note that even if you are proceeding in forma pauperis, you must pay for copies of documents in your case.

Notice to Prisoner Litigants: The filing date reflected on the Court's docket shows the date your filing was received by the Court. It may not be the legal filing date for your pleading. If you are a prisoner litigant who is proceeding in forma pauperis in a civil case, you will still be obligated to pay the entire \$350 filing fee in installments in accordance with the Prison Litigation Reform Act (PLRA) regardless of the outcome of your case. See 28 U.S.C. § 1915(b). The Court does not have the authority to waive that requirement. You will not be entitled to the return of payments made toward the fee for any reason, even if your case is dismissed before service in accordance with laws that require the Court to screen in forma pauperis cases and cases filed by prisoners. See 28 U.S.C. §§ 1915(e)(2)(B) & 1915A. If you filed a petition for a writ of habeas corpus, the filing fee is \$5.00. If you are granted leave to proceed in forma pauperis in a habeas case, you are not required to pay the filing fee.

Screening Requirements: Pursuant to 28 U.S.C. § 1915(e)(2)(B) and § 1915A, the Court screens all civil cases filed by prisoners, whether the prisoner pays the filing fee and administrative fee upfront or is granted leave to proceed *in forma pauperis*. Pursuant to 28 U.S.C. §

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1915(e)(2)(B), the Court also screens all civil cases in which a plaintiff who is not a prisoner has been granted leave to proceed *in forma pauperis*. As soon as an Order is issued, a copy will be mailed to you. The Court generally will not appoint counsel, rule on motions, serve your Complaint on the Defendant(s), or require an Answer until after the screening process is complete.

Service: If you filed a motion to proceed without prepaying the filing fee (in forma pauperis) and the Court grants your motion, the Court will direct service on your behalf. The Clerk's Office will not issue summonses in your case or direct service unless your motion to proceed in forma pauperis is granted and the Judge in your case directs service. You may be required to complete forms (USM-285 forms) so that service can be made in your case. If you receive those forms in the mail, please complete them and return them to the U.S. Marshals Service. Failure to do so may result in the dismissal of your case. If you paid the fees for your case, the Clerk's Office will issue summonses to you, and you are responsible for serving the defendants in this case in the manner and time described in Federal Rule of Civil Procedure 4. Please note that if you are suing the United States, its agencies, corporations, officers, or employees, you must comply with Federal Rule of Civil Procedure 4(i).

Contacting the Court: Do not send documents directly to the District Judge or Magistrate Judge assigned to your case. All documents must be filed with the Clerk of Court at one of the following addresses or emailed to PAED\_Documents@paed.uscourts.gov.

Clerk of Court, EDPa

James A. Byrne U.S. Courthouse

Room 2609

601 Market Street Philadelphia,

PA 19106

Clerk of Court, EDPa

Edward N. Cahn U.S. Courthouse &

Federal Building

504 W. Hamilton Street

Allentown, PA 18101

You may file documents in your case in person at the above address or by mail. If you would like permission to file documents electronically, you must file a motion seeking permission from the Judge assigned to your case. See Local Rule 5.1.2(4)(b). If you are given permission to file electronically, the Judge may terminate your electronic filing privileges if you abuse the system by excessive filings, either in number or length.

Sending Documents to Opposing Parties: All pleadings and other papers submitted to the Court must be served on opposing counsel for all other parties, or directly on any parties representing themselves (proceeding *pro se*). Service may be made by mail. You must let the Clerk know that you served your papers on the other parties by completing a certificate of service showing the date and manner of service and attaching it to the original of the documents and all copies before you send them to the Court. An example of a certificate of service by mail follows:

"I, (name), do hereby certify that a true and correct copy of the foregoing (name of pleading or other paper) has been served upon (name(s) of person(s) served) by placing the same in the U.S. mail, properly addressed, this (day) of (month), (year).

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JEFFERACE

(Signature)"

Legal Advice: The District Judges, Magistrate Judges, *Pro Se* Law Clerks and other Court staff cannot provide you with legal advice, meaning they cannot tell you what type of motion to file or advise you on other legal issues. However, Court staff can provide you with the proper forms and inform you of the status of your case. The Clerk of Court and other Clerk's Office staff do not have the authority to take any action with respect to your case unless a Judge or rule authorizes the Clerk to do so.

Rules that Apply to Your Case: Your case is subject to the Federal Rules of Civil Procedure and the Eastern District of Pennsylvania's Local Rules of Civil Procedure, which you can find on the Court's website. One important rule to be aware of is Local Rule 7.1, which requires you to file and serve a proper response to all motions within fourteen (14) days unless the Judge assigned to your case directs otherwise. If you need more time to respond to a motion or comply with a deadline, you must file a motion for an extension of time. If your case is transferred to another district, the local rules in that district will apply to your case.

**Discovery:** Please review Local Rule 26.1(f), which provides that "[n]o motion or other application pursuant to the Federal Rules of Civil Procedure governing discovery or pursuant to this rule shall be made unless it contains a certification of counsel that the parties, after reasonable effort, are unable to resolve the dispute." That means you must attempt to resolve any discovery disputes by contacting defendant's counsel directly by telephone or through correspondence before you ask the Court for help with discovery matters. You are responsible for sending your discovery requests to the opposing party or parties in your case. Please note that interrogatories, requests for production and inspection, requests for admission, and responses to discovery requests are generally not filed with the Court. See Local Rule 26.1.

Appeals: If you want to appeal the dismissal of your case, you must file a notice of appeal in your district court case. See Federal Rule of Appellate Procedure 3(a). For more information about the appeals process, please see the website for the Third Circuit Court of Appeals for more information or contact the Third Circuit Court of Appeals.

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"I, (name), do herd y certify that a true and correct copy of the firegoing (name of pleading or other paper) has been served upon (name(s) of person(s) served) by placing the

JEFFGRACE 17305 Easton rd Doylestown PA 18901 G-40 083655





James A. Byne

So Us Court House Room 2609

601 market Street

P Hiladelphia PA 19106

Judge Diamond